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	-	Application Number	10/080,124		
TRANSMIT	TAL	Filing Date	2/21/2001 De et al.		
FORM		First Named Inventor			
(to be used for all correspondence after initial filing)		Group Art Unit	2681		
1 ₂ -1		Examiner Name	Not Yet Known		
Total Number of Pages in This Submission		Attorney Docket Number	I-2-0173.3US		
+-tannelic E	ENCL	OSURES (check	all that apply)		
Fee Transmittal Form	Assignm (for an i	nent Papers Application)	After Allowance Communication to Group		
Fee Attached	Drawing	g(s)	Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter		
Amendment / Reply	Licensin	ng-related Papers			
After Final	Petition				
Affidavits/declaration(s)	Provision	to Convert to a onal Application			
Extension of Time Request	Power of Change Address	of Attorney, Revocation of Correspondence	Other Enclosure(s) (please		
Express Abandonment Request		al Disclaimer st for Refund			
Information Disclosure Statement	CD, No	ımber of CD(s)	RECEIVED		
Certified Copy of Priority Document(s)	Remarks		AUG 1 3 2002		
Response to Missing Parts/ Incomplete Application		-	Technology Center 2600		
Response to Missing Parts					

Firm	Jeffrey M. Glabicki	Reg. No. 42,584
<i>or</i> Individual name	Volpe and Koenig, P,C.	
Signature	What M- Halaite.	
Date	August 5, 2002	
	CERTIFICATE OF MAIL	LING
I hereby certify that this corresp	ondence is being deposited with the United States Postal Service with sufficient p	postage as first class mail in an envelope
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Volpe and Koenig Revision of PTO/SB/17 (10-01)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE r the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number. Complete If Known FEE TRANSMITTAL 10/080,124 **Application Number** 2/21/2002 Filing Date for FY 2002 De et al. First Named Inventor Not Yet Known **Examiner Name** Patent fees are subject to annual revision. 2681 **Group Art Unit** 0 TOTAL AMOUNT OF PAYMENT (\$) I-2-0173.3US Attorney Docket No. METHOD OF PAYMENT FEE CALCULATION (continued) The Commissioner is hereby authorized to charge 3. ADDITIONAL FEES indicated fees and credit any overpayments to: Large Small Deposit **Entity Entity** Account 22-0493 Fee Paid Fee Fee Number **Fee Description** (\$) Code (\$) Deposit VOLPE AND KOENIG, P.C. 130 205 65 Surcharge - late filing fee or oath 105 Account Name 50 227 Surcharge - late provisional filing fee or Charge any Deficiencies or Credit any Overpayment cover sheet in the Total Fees Associated With This Communication 130 139 130 Non-English specification Applicant claims small entity status. e 37 CFR 1.27 147 2,520 147 2,520 For filing a request for ex parte reexamination **Payment Enclosed:** Requesting publication of SIR prior to 920* 112 920° Money Order Credit card 113 1,840° Requesting publication of SIR after 113 1.840° **FEE CALCULATION Examiner action** Extension for reply within first month Extension for reply within second month 1. BASIC FILING FEE Ш 216 200 **Large Entity Small Entity** Fee Fee Fee Fee Code (\$) Code (\$) **Fee Description** Extension for reply within third month Fee Paid Extension for reply within fourth month

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106 330 206 165	Design filing fee	12	28 1,960	228 980	0	Extension for reply within fifth month Notice of Appeal	1,2	\preceq
107 510 207 255	Plant filing fee	11	19 320	219 16	60	Notice of Appeal		_
108 740 208 370	Reissue filing fee	12	20 320	220 16	60	Filing a brief in support of an appeal		_
114 160 214 80	Provisional filing fee	12	21 280	221 14	40	Request for oral hearing		_
			38 1,510	138 1,51	10	Petition to institute a public use proceeding	<u> </u>	
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	Fee from Ext <u>ra Claims below</u>	Fee Paid 14	42 1,280	242 64	40	Utility issue fee (or reissue)		
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103 18 203 9	Claims in excess of 20					property (times number of properties)		\dashv
102 84 202 42	Independent claims in exc	ess of 3	46 740	246 37		Filing a submission after final rejection		
104 280 204 140	Multiple dependent claim, if not paid					(37 ČFR § 1.129(a))	ļ	
109 84 209 42	** Reissue independent claims		149 740	249 37	370	For each additional invention to be examined (37 CFR § 1.129(b))		
	over original patent		70 740	070 0	270			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent		S 01 20	79 740			Request for Continued Examination (RCE)		
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SUBMITTED BY

Name (Print/Type)

Signature

Complete (if applicable)

Registration No. (Attorney/Agent)

A 2,584

Telephone

215-568-6400

Date

**or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

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SUBTOTAL (3)

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